

COMPLAINT OPS-8795

YOUR PERSONAL INFORMATION

Complaint ID :

Name :

Race :

Address :

Sex : MALE

Age : 33

Your contact information

Best time to contact : 04:00 PM

Primary Contact Phone Number :

E-mail Address :

Home Phone Number :

Your injury information

Were you injured in this incident? YES

Please describe the injury : BRUISE TISSUE AND SERVEL SPRAIN ANKLE

Did you need medical attention? YES

Hospital/Medical Center :
ILLINOIS
MASONIC
MEDICAL
CENTER

Please describe the medical treatment : ALSO ELEMHURST MEMORIAL HOSPITAL

INFORMATION ABOUT THE INCIDENT

WE WERE PART OF A PARTY BUS THAT PULL UP TO ROCKN ROLL MCDONALD'S UPON MYSELF GOING TO THE WASHROOM I WAS APPROACH BY 2 GUYS IN THE BATHROOM TRYING TO ROB ME ONE OF THE GUYS THAT WAS ON THE PARTY BUS HAD THE SITUATION SET UP UPON ME TELLING THE GUYS THAT I WASN'T GOING TO GIVE THEM NOTHING I OPEN THE BATHROOM DOOR UPON GETTING TO THE EXIT ONE OF THE GUYS SNATCH MY CHAIN FROM MY NECK AND RAN I THEN APPROACH THE GUY THAT WAS APART OF THIS PART BUS I TOLD HIM HE HAD ME SET UP I HIT HIM THEN PEOPLE OUTER NO WHERE CAME TO THIS GUY RESCUE POLICE CAME WE WERE

LOG #

Attachment #

TRYING TO EXPLAIN THAT THIS GUY TRY TO GET ME ROB WERE
THEN ONE OF YOUR OFFICER PUSH MY WIFE AND I ASK HIM NOT TO
TOUCH HER SO HE DID IT AGAIN I THEN APPROACH YOUR OFFICER
WITH A PUSH AND I REPEATED AGAIN DONT TOUCH HER SHE
EXPLAINING TO YOU WHAT HAPPEN AND YOU GOING TO PUSH HER
OTHER OFFICER GOT INVOLVED WHERE I WAS TOOKEEN DOWN TO
THE GROUND I DIDN'T SEE THE OFFICER ONCE I WAS IN HAND CUFF
LAYING FACE DOWN A OFFICER STOMP MY RIGHT ANKLE UPON
REACHING THE STATION I WAS BEGGING FOR MEDICAL ATTENTION I
WAS REFUSED UNTIL MAYBE 3 HOURS LATER WHEN THE BOOKING
GUY SAW I COULDN'T WALK HE THEN TOLD YOUR ARRESTING
OFFICER TO TAKE ME TO THE HOSIPTAL THEY BEGIN TO ARGUE A
LITTLE UNTIL THE ARRESTING OFFICER FINALLY GAVE IN

Location of the incident**Street Number :** 600**Direction :** N **Street Name :** CLARK ST **Apt No. :****Building Name :** ROCK N ROLL MCDONALD'S**Floor :****Unit :****Location Description :****Incident Date and Time****Date :** 10/14/2011**Time :** 01:30 AM**Evidence****Video Evidence :** YES**Audio Evidence :** NO**INFORMATION ABOUT THE POLICE OFFICERS****Police officer #1****Last Name :****First Name :****Star No. :****Rank :****Assigned Unit :** 18**On Duty :** YES**Sex :** MALE**Race :** WHITE**Officer Description :****Police Vehicle Beat Number :****Vehicle Number :****License Plate :****Vehicle Description :**

INFORMATION ABOUT VICTIMS AND WITNESSES**Victim #1 personal information**

Last Name : [REDACTED]

First Name : ALICIA

Race : [REDACTED]

Age : 30

Sex : [REDACTED]

Contact: [REDACTED]

Victim #1 injury information

Was the victim injured in this incident?: NO

Please describe the injury :

Did the victim need medical attention? NO

Hospital/Medical Center :

Please describe the medical treatment :